

Fill in this information to identify the case:

Debtor name Roberson Cartridge Co., LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number (if known) 22-20192-7

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
--	--

2.1	Creditor's name <u>Amarillo National Bank</u>	Describe debtor's property that is subject to a lien <u>14711 Garrison St, Amarillo</u>	\$1,232,550.00	\$5,000,000.00
	Creditor's mailing address <u>PO Box 1</u>	Describe the lien <u>.</u>		
	<u>Amarillo TX 79105</u>	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known <u></u>	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred <u>08/19/2021</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number <u></u>			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.			

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$5,654,835.00

Debtor **Roberson Cartridge Co., LLC**

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Part 1: Additional Page

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
**Value of collateral
that supports
this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<div style="background-color: black; color: white; padding: 2px; text-align: center; font-weight: bold;">2.2</div>	Creditor's name CNC Associates <hr/> Creditor's mailing address 2900 Challenger Place <hr/> <hr/> Oxnard CA 93030 <hr/> Creditor's email address, if known <hr/> <hr/> Date debt was incurred <hr/> Last 4 digits of account number <hr/> <hr/> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <div style="margin-left: 20px;"> <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ </div>	Describe debtor's property that is subject to a lien 2 - Haas/St 20Y & 1 Bar Feeder <hr/> Describe the lien Purchase Money <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
<div style="background-color: black; color: white; padding: 2px; text-align: center; font-weight: bold;">2.3</div>	Creditor's name Happy State Bank <hr/> Creditor's mailing address 701 S. Taylor LB-120 <hr/> <hr/> Amarillo TX 79101 <hr/> Creditor's email address, if known 4000012937 <hr/> Date debt was incurred 01/07/2020 <hr/> Last 4 digits of account number <hr/> <hr/> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <div style="margin-left: 20px;"> <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ </div>	Describe debtor's property that is subject to a lien Security Agreement <hr/> Describe the lien Non-Purchase Money <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$52,285.00	\$52,285.00

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Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2.4 Creditor's name **Matador Brass Partners, LLC** Describe debtor's property that is subject to a lien **\$4,300,000.00** **\$1,707,275.00**

Creditor's mailing address **Loan Agreement**

5956 Sherry Lane, Suite 1300

Describe the lien

Fee Simple

Dallas TX 75225

Is the creditor an insider or related party?

☐ No

☒ Yes

Creditor's email address, if known

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☒ Contingent

☒ Unliquidated

☒ Disputed

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines

2.5 Creditor's name **Newlane Finance Company** Describe debtor's property that is subject to a lien **\$70,000.00** **\$70,000.00**

Creditor's mailing address

123 S. Broad St, 17th Fl

IM Equipment

Describe the lien

Purchase Money

Philadelphia PA 19109

Is the creditor an insider or related party?

☒ No

☐ Yes

Creditor's email address, if known

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred **03/09/2022**

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ Contingent

☐ Unliquidated

☐ Disputed

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines

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United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number 22-20192-7
(if known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim Priority amount

2.1 Priority creditor's name and mailing address

Comptroller of Public Accounts

Taxation Division Bankruptcy

P.O. Box 12548

Austin TX 78711

Date or dates debt was incurred

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(8)

As of the petition filing date, the
claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Sales Taxes

Is the claim subject to offset?

- ☒ No
☐ Yes

\$991.00 \$991.00

2.2 Priority creditor's name and mailing address

Internal Revenue Services

PO Box 7346

Philadelphia PA 19101-7346

Date or dates debt was incurred

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(8)

As of the petition filing date, the
claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Payroll Tax

Is the claim subject to offset?

- ☒ No
☐ Yes

\$18,000.00 \$18,000.00

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.5</div>	Nonpriority creditor's name and mailing address <u>Alex Dodson</u> <u>232 Coon Hollow Trail</u> <u>Hedgesville</u> <u>WV</u> <u>25427</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.6</div>	Nonpriority creditor's name and mailing address <u>Alex Klein</u> <u>3737 Buffalo Speedway, Ste 1900</u> <u>Houston</u> <u>TX</u> <u>77098</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$587.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.7</div>	Nonpriority creditor's name and mailing address <u>Allen Christy</u> <u>2600 Cherrywood Rd</u> <u>Minnetonka</u> <u>MN</u> <u>55305</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$299.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.8</div>	Nonpriority creditor's name and mailing address <u>Andrew Lee</u> <u>13000 Occidental Rd</u> <u>Sebastopol</u> <u>CA</u> <u>95472</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$502.45</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.9</div>	Nonpriority creditor's name and mailing address <u>Andrew Rockwell</u> <u>2740 Inez Ct</u> <u>Niles</u> <u>MI</u> <u>49120</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$318.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.10</div>	Nonpriority creditor's name and mailing address <u>Andrew Sagatelian</u> <u>1395 Koch Ln</u> <u>San Jose</u> <u>CA</u> <u>95125-4134</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$412.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.11</div>	Nonpriority creditor's name and mailing address <u>Andrzej Dzik jurasz</u> <u>4 Haggerty Dr</u> <u>West Orange</u> <u>NJ</u> <u>07052</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$409.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.12</div>	Nonpriority creditor's name and mailing address <u>Angel Foster</u> <u>700 Adella Ave</u> <u>Sevierville</u> <u>TN</u> <u>37862</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$389.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.17</div>	Nonpriority creditor's name and mailing address <u>Arthur Alphin</u> <u>7679 Fieldstone Ranch Square</u> <u>Vero Beach</u> <u>FL</u> <u>32967</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,025.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.18</div>	Nonpriority creditor's name and mailing address <u>Barry Gates</u> <u>17350 Angelaine Way</u> <u>Grandada Hills</u> <u>CA</u> <u>91344</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$395.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.19</div>	Nonpriority creditor's name and mailing address <u>Barry Glover</u> <u>304 Kentwood Lane</u> <u>Lexington</u> <u>NC</u> <u>27295</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.20</div>	Nonpriority creditor's name and mailing address <u>Barry Millard</u> <u>3009 W. Topeka Dr.</u> <u>Phoenix</u> <u>AZ</u> <u>85027-4925</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$259.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.21</div>	Nonpriority creditor's name and mailing address <u>Barry Norenburg</u> <u>905 Mooers Ave SE</u> <u>Cokato</u> <u>MN</u> <u>55321</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$294.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.22</div>	Nonpriority creditor's name and mailing address <u>Ben Gurtler</u> <u>38 Holmes Rd</u> <u>Porter Corners</u> <u>NY</u> <u>12859</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$224.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.23</div>	Nonpriority creditor's name and mailing address <u>Benjamin Marjamaa</u> <u>6803 W. National Ave</u> <u>West Allis</u> <u>WI</u> <u>53214</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.24</div>	Nonpriority creditor's name and mailing address <u>Bennie Kight</u> <u>206 N. Chestnut</u> <u>Troy</u> <u>TN</u> <u>38260</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$505.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.25</div>	Nonpriority creditor's name and mailing address Benzel Macmaster 5955 Joyce Way Dallas TX 75225 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$312.83
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.26</div>	Nonpriority creditor's name and mailing address Bernard Fargen 7994 Calle De Gato Redding CA 96001 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,191.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.27</div>	Nonpriority creditor's name and mailing address Bill Carlton 4888 Kennedale New Hope Rd Fort Worth TX 76140 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$568.30
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.28</div>	Nonpriority creditor's name and mailing address Bill Hamilton 621 Cedar St Bellevue ID 83313 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,559.98

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.29</div>	Nonpriority creditor's name and mailing address Blake Stenzel 121 West 9th St Mankato MN 56001 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,075.99
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.30</div>	Nonpriority creditor's name and mailing address BLISS Munitions Equipment 4303 40th Street Kentwood MI 49512 Date or dates debt was incurred 09/27/2022 Last 4 digits of account number 1 0 0 8	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Transportation for equipment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$136,400.81
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.31</div>	Nonpriority creditor's name and mailing address Bob Gibson 2000 Westfall Rd Lovelock NV 89419 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$428.00
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.32</div>	Nonpriority creditor's name and mailing address Bob Stahl 143 Crown Point Dr. Bellvue CO 80512 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$443.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.33</div> Nonpriority creditor's name and mailing address Bobby Babe 3106 Center St. Greensborro NC 27407 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$322.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.34</div> Nonpriority creditor's name and mailing address Bobby Hempfling 2 Peak Road South Peak Austin TX 78746 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$339.35
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.35</div> Nonpriority creditor's name and mailing address Brad Hensley 481 Rodalyn Dr. Boerne TX 78006 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$349.10
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.36</div> Nonpriority creditor's name and mailing address Brad Quillin 1315 Hempstead 7 Hope AR 71801 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,068.98

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.37</div>	Nonpriority creditor's name and mailing address Brent Ravnass 1959 16th Ave NW Turtle Lake ND 58575 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$587.99
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.38</div>	Nonpriority creditor's name and mailing address Brett Tapley 2246 SE Upchurch Way Portland Orchard WA 98366 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,240.98
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.39</div>	Nonpriority creditor's name and mailing address Brian Briggs 15 Sachem Hill Rd Windsor CT 06095 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$243.99
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.40</div>	Nonpriority creditor's name and mailing address Brian Caffey 4575 Galisteo Loop Las Cruces NM 88011 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$517.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.41</div>	Nonpriority creditor's name and mailing address <u>Brian Hammer</u> <u>65 Macalester</u> <u>Pueblo</u> <u>CO</u> <u>81001</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$294.79</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.42</div>	Nonpriority creditor's name and mailing address <u>Brian Meyette</u> <u>166 Skyline Dr.</u> <u>Cornish</u> <u>NH</u> <u>03745</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$177.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.43</div>	Nonpriority creditor's name and mailing address <u>Brian Parker</u> <u>14 Greenbank Rd</u> <u>Liskeard, NA P114 3DP</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$390.00</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.44</div>	Nonpriority creditor's name and mailing address <u>Brian Pipes</u> <u>13408 S. Al Gossett</u> <u>Lone Jack</u> <u>MO</u> <u>64070</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$294.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.45</div>	Nonpriority creditor's name and mailing address <u>Brian Radway</u> <u>6040 Fry Rd</u> <u>Brook Park</u> <u>OH</u> <u>44142</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$403.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.46</div>	Nonpriority creditor's name and mailing address <u>Brian Reeves</u> <u>2 Wingate Way</u> <u>Fort Saskatchewan, AB T8L 0W</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$280.00</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.47</div>	Nonpriority creditor's name and mailing address <u>Brian Silkwood</u> <u>2810 Bechelli Ln Space A-6</u> <u>Redding</u> <u>CA</u> <u>96002</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$199.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.48</div>	Nonpriority creditor's name and mailing address <u>Bruce Banks</u> <u>2864 1/2 Casimir Dr.</u> <u>Grand Junction</u> <u>CO</u> <u>81503</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$260.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.49</div>	Nonpriority creditor's name and mailing address <u>Bruce Lucas</u> <u>387 Irving WickDr. E</u> <u>Heath</u> <u>OH</u> <u>43056</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$429.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.50</div>	Nonpriority creditor's name and mailing address <u>Bruce Mcmillan</u> <u>PO Box 21179</u> <u>Whitehorse, YT Y1A 6R1</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$355.20</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.51</div>	Nonpriority creditor's name and mailing address <u>Bryan Bossier Sr.</u> <u>2135 Coulee Crossing</u> <u>Woodworth</u> <u>LA</u> <u>71485</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,104.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.52</div>	Nonpriority creditor's name and mailing address <u>Bryan Lamm</u> <u>23034 Indian Rdie Dr.</u> <u>Katy</u> <u>TX</u> <u>77450</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$258.71</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.53</div>	Nonpriority creditor's name and mailing address <u>Bryan Massey</u> <u>29705 Hwy 141</u> <u>Whitewater</u> <u>CO</u> <u>81527</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$598.98</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.54</div>	Nonpriority creditor's name and mailing address <u>Bryon McCall</u> <u>10593 Highway 133</u> <u>Meta</u> <u>MO</u> <u>65058</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$19.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.55</div>	Nonpriority creditor's name and mailing address <u>Calvin Featherly</u> <u>213 West 5th Ave</u> <u>Mining</u> <u>WI</u> <u>54859</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$494.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.56</div>	Nonpriority creditor's name and mailing address <u>Carl Nelson</u> <u>10934 Brookfield Rd</u> <u>Chatsworth</u> <u>CA</u> <u>91311</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$604.98</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.57</div>	Nonpriority creditor's name and mailing address <u>Carol Oday</u> <u>6026 Gnarled Oaks Ct.</u> <u>Humble TX 77346</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$290.64</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.58</div>	Nonpriority creditor's name and mailing address <u>Casey Collins</u> <u>7117 US-287</u> <u>Harrison MT 59735</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$325.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.59</div>	Nonpriority creditor's name and mailing address <u>Cash Capps</u> <u>2620 Forest Park Dr. Apt 3</u> <u>Anchorage AK 99517</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$204.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.60</div>	Nonpriority creditor's name and mailing address <u>Charles Bolding</u> <u>1438 New Mexico Rd</u> <u>Bowdon GA 30108</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$227.49</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.61</div>	Nonpriority creditor's name and mailing address <u>Charles Campbell</u> <u>PO Box 153</u> <u>Ennis</u> <u>MT</u> <u>59729</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$267.92</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.62</div>	Nonpriority creditor's name and mailing address <u>Charles Moulis</u> <u>5649 Dove Dr.</u> <u>Milton</u> <u>FL</u> <u>32571</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$213.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.63</div>	Nonpriority creditor's name and mailing address <u>Charlie Chan</u> <u>24627 SE Hoffmeister Rd</u> <u>Damascus</u> <u>OR</u> <u>97089</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,229.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.64</div>	Nonpriority creditor's name and mailing address <u>Chase Mcevoy</u> <u>1536 N. Westlynn</u> <u>Wichita</u> <u>KS</u> <u>67212</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$292.50</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.65</div>	Nonpriority creditor's name and mailing address <u>Chris Alvey</u> <u>1941 S. 46th</u> <u>Omaha</u> <u>NE</u> <u>68106</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$187.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.66</div>	Nonpriority creditor's name and mailing address <u>Chris Conner</u> <u>1008 Westwood Ave</u> <u>Chattanooga</u> <u>TN</u> <u>37405</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$236.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.67</div>	Nonpriority creditor's name and mailing address <u>Chris Fredette</u> <u>13 Lance Lane</u> <u>Albany</u> <u>NY</u> <u>12205</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$328.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.68</div>	Nonpriority creditor's name and mailing address <u>Chris Salsberry</u> <u>137 Powder Soprights Loop</u> <u>Myrtle Beach</u> <u>SC</u> <u>29588</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$348.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.69</div> Nonpriority creditor's name and mailing address <u>Chris Schimp</u> <u>1705 Grayson Rd.</u> <u>PO Box 370</u> <u>Eldorado</u> <u>IL</u> <u>62930</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$231.99</u>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.70</div> Nonpriority creditor's name and mailing address <u>Chris Sineath</u> <u>11 East Forsyth St, Apt 708</u> <u>Jacksonville</u> <u>FL</u> <u>32202</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$537.99</u>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.71</div> Nonpriority creditor's name and mailing address <u>Chris Zwicky</u> <u>220 Buena Vista Rd</u> <u>Fleetwood</u> <u>PA</u> <u>19522</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,113.99</u>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.72</div> Nonpriority creditor's name and mailing address <u>Christian Duguet</u> <u>Place de la prefecture 1</u> <u>Charles-Mezieres, 08000</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$382.49</u>
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Debtor **Roberson Cartridge Co., LLC**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.73</div>	Nonpriority creditor's name and mailing address <u>Christina Chaney</u> <u>3403 N. Edgewater Dr.</u> <u>Wasilla</u> <u>AK</u> <u>99623</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$220.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.74</div>	Nonpriority creditor's name and mailing address <u>Christopher Hawley</u> <u>110 Glendale Rd</u> <u>Boyertown</u> <u>PA</u> <u>19512-7624</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$195.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.75</div>	Nonpriority creditor's name and mailing address <u>Chuck Muschany</u> <u>4870 Retrivers Circle</u> <u>Anchorage</u> <u>AK</u> <u>99502</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$791.59</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.76</div>	Nonpriority creditor's name and mailing address <u>Cody Moon</u> <u>437 N. 14th St</u> <u>New Castle</u> <u>IN</u> <u>47362</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$354.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.77</div> Nonpriority creditor's name and mailing address Cody Van Dyke 5522 N. Jameson Ave Fresno CA 93723 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$347.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.78</div> Nonpriority creditor's name and mailing address Collin Smipson 6641 Barclay Lane Garland TX 75044 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$248.96
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.79</div> Nonpriority creditor's name and mailing address Concast Metal 1 14315 State Route 113 Wakeman OH 44889 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.80</div> Nonpriority creditor's name and mailing address Cory Vollmer 7401 Cerrillos Rd Santa Fe NM 87507 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$799.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.81</div>	Nonpriority creditor's name and mailing address <u>Costel Ionescu</u> <u>1806 Stagecoach Trail</u> <u>Round Rock TX 78681</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$437.32</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.82</div>	Nonpriority creditor's name and mailing address <u>Curt Diehl</u> <u>8870 1st St</u> <u>St. Cloud FL 34773</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$204.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.83</div>	Nonpriority creditor's name and mailing address <u>Curt Gerlach</u> <u>10 Thalia</u> <u>Ladera Ranch CA 92694</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$367.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.84</div>	Nonpriority creditor's name and mailing address <u>Curt Newport</u> <u>8525 Wagon Wheel Rd.</u> <u>Alexandria VA 22309</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$403.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.85</div>	Nonpriority creditor's name and mailing address Dale Guerra PO Box 263 Morro Bay CA 93443 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$302.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.86</div>	Nonpriority creditor's name and mailing address Dale Pedersen PO Box 40 Graham WA 98338 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,529.98
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.87</div>	Nonpriority creditor's name and mailing address Dalton Harper 19 Bridle Trail Louisburg MO 65685 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div>	Nonpriority creditor's name and mailing address Dana Regatuso 5330 rt 436 Dansville NY 14437 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$302.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.89</div>	Nonpriority creditor's name and mailing address <u>Daniel Allison</u> <u>10677 West 25th Ave</u> <u>Lakewood</u> <u>CO</u> <u>80215</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$210.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.90</div>	Nonpriority creditor's name and mailing address <u>Daniel Barbeau</u> <u>3910 Dumouchel</u> <u>Trois-Rivieres, QC G8Y 4S9</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$356.13</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.91</div>	Nonpriority creditor's name and mailing address <u>Daniel Harris</u> <u>1802 W. Maryland Ave</u> <u>Apt 2055</u> <u>Phoenix</u> <u>AZ</u> <u>85015</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$394.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.92</div>	Nonpriority creditor's name and mailing address <u>Daniel Merritt</u> <u>6 Marguerite</u> <u>Longview</u> <u>TX</u> <u>75601</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$205.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.97</div>	Nonpriority creditor's name and mailing address <u>Darren Salyards</u> <u>456 Spruce Hill Wau</u> <u>Charles Town</u> <u>WV</u> <u>25414</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.98</div>	Nonpriority creditor's name and mailing address <u>Darwin Burrington</u> <u>1903 Kingstree Ct.</u> <u>Rochester Hills</u> <u>MI</u> <u>48137-9609</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$260.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.99</div>	Nonpriority creditor's name and mailing address <u>Darwin Williams</u> <u>PO Box 758</u> <u>Kentfield</u> <u>CA</u> <u>94914</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$244.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.100</div>	Nonpriority creditor's name and mailing address <u>Daryl Dean</u> <u>183 Cross Road</u> <u>New Hampton</u> <u>NH</u> <u>03256</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$228.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.101</div>	Nonpriority creditor's name and mailing address <u>Dave Mcleran</u> <u>5476 Sandhollow Rd</u> <u>New Plymouth</u> ID <u>83655</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$539.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.102</div>	Nonpriority creditor's name and mailing address <u>Dave Stoll</u> <u>10280 Hadley Rd</u> <u>Gregory</u> MI <u>48137</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$260.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.103</div>	Nonpriority creditor's name and mailing address <u>Dave Uslar</u> <u>120 Old Philly Pike</u> <u>Kempton</u> PA <u>19529</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$243.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.104</div>	Nonpriority creditor's name and mailing address <u>David Arrington</u> <u>2584 Edinberg Way</u> <u>Florence</u> SC <u>29501</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$403.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.105</div> Nonpriority creditor's name and mailing address David Clement PO Box 351 Munfordville KY 42765-0351 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$307.43
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.106</div> Nonpriority creditor's name and mailing address David Daniels 255 E. 750 N PO Box 183 Willard UT 84340 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.107</div> Nonpriority creditor's name and mailing address David Dentoni PO Box 761 Clements CA 95227 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,997.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.108</div> Nonpriority creditor's name and mailing address David Stark 168 Croydon Turnpike Plainfield NH 03781 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$228.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.109</div>	Nonpriority creditor's name and mailing address <u>Dennis Denney</u> <u>325 Seefried Lane</u> <u>Balckfoot</u> ID <u>83221</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$599.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.110</div>	Nonpriority creditor's name and mailing address <u>Dennis Goergen</u> <u>13281 Ighway 4 E</u> <u>Ripley</u> MS <u>38663</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$193.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.111</div>	Nonpriority creditor's name and mailing address <u>Dennis Morlacci</u> <u>214 Campbell Rd</u> <u>Boyers, PA</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$289.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.112</div>	Nonpriority creditor's name and mailing address <u>Dennis Reid</u> <u>42 Lexington St</u> <u>PO Box 127</u> <u>Sandusky</u> MI <u>48471</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$439.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.113</div> Nonpriority creditor's name and mailing address Dewey Youngerman 882 White Mountain Rd Naples ID 83847 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$365.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.114</div> Nonpriority creditor's name and mailing address Dirk Zimmick 37535 Elizabeth Dr. Lebanon OR 97355 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$227.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.115</div> Nonpriority creditor's name and mailing address Don Lewis 127 Mountian View Dr. Thermopolis WY 82443 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,633.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.116</div> Nonpriority creditor's name and mailing address Donald Fryer 704 Lago Vista St. San Marcos TX 78666 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$394.02

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.117</div>	Nonpriority creditor's name and mailing address <u>Donald Rice</u> <u>15875 Lindbergh Lane</u> <u>Wellington</u> <u>FL</u> <u>33414</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$303.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.118</div>	Nonpriority creditor's name and mailing address <u>Donald Spence</u> <u>26905 S. Stony Island Ave</u> <u>Crete</u> <u>IL</u> <u>60417</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$244.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.119</div>	Nonpriority creditor's name and mailing address <u>Dorje Strang</u> <u>100 Teapot Valley Rd.</u> <u>Brightwater, TM 7091</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$449.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.120</div>	Nonpriority creditor's name and mailing address <u>Doug Deroy</u> <u>1145 SE Boise Dr.</u> <u>Portland</u> <u>OR</u> <u>97202</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$329.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.121</div>	Nonpriority creditor's name and mailing address <u>Douglas Powell</u> <u>1794 Newton Dr.</u> <u>Cheyenne</u> <u>WY</u> <u>82001-1650</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$398.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.122</div>	Nonpriority creditor's name and mailing address <u>Dustin Addis</u> <u>180 Sizemore Rd</u> <u>McDowell</u> <u>KY</u> <u>41651</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$347.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.123</div>	Nonpriority creditor's name and mailing address <u>Dustin Denton</u> <u>2155 Hwy 354</u> <u>Evening Shade</u> <u>AR</u> <u>72532</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,247.39</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.124</div>	Nonpriority creditor's name and mailing address <u>Dustin Schabatka</u> <u>5115 N. 191st Dr</u> <u>Litchfield Park</u> <u>AZ</u> <u>85340</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$235.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.125</div>	Nonpriority creditor's name and mailing address Dustin Swarthout 14502 East Y Ave. Fulton MI 49052 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,119.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.126</div>	Nonpriority creditor's name and mailing address Dwight Laney PO Box 326 Buchtel OH 45716 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$578.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.127</div>	Nonpriority creditor's name and mailing address Dylan Todd 1402 E. Grand Ave, Suite B Arroyo Grande CA 93420 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$810.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.128</div>	Nonpriority creditor's name and mailing address Earnest Mayhood PO Box 155 Rio Vista CA 94571 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$417.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.129</div> Nonpriority creditor's name and mailing address Easton Harrold PO Box 62047 Midland TX 79711 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$611.60
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.130</div> Nonpriority creditor's name and mailing address Edward Catalano 13 Ames St., Apt 2 Beverly MA 01915 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$315.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.131</div> Nonpriority creditor's name and mailing address Edward Condon 706 Shorth Beach Rd St. James NY 11780 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$696.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.132</div> Nonpriority creditor's name and mailing address Edward Metzger 11698 Lakeshore Dr. Grand Haven MI 49417 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.137</div> Nonpriority creditor's name and mailing address Enrique Cuellar 8602 Dana Top Dr. Boerne TX 78015 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,913.31
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.138</div> Nonpriority creditor's name and mailing address Erik Jensen 2072 Summit St. Franktown CO 80116 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$807.98
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.139</div> Nonpriority creditor's name and mailing address Erik Olson 1813 El Dorado Terrace Escondido, CA92025 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.140</div> Nonpriority creditor's name and mailing address Evan Allen 2115 North Nelson st. Pampa TX 79065 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$548.28

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.141</div> Nonpriority creditor's name and mailing address Ezekiel Vaughn 523 Oak Hills Dr Newark TX 76071 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$343.68
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.142</div> Nonpriority creditor's name and mailing address Fallon Kelly 316 Main St. Lisbon ND 58054 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$304.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.143</div> Nonpriority creditor's name and mailing address Frank Buttenhoff 2130 Lateforest Dr. Weatherford TX 76087 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$292.26
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.144</div> Nonpriority creditor's name and mailing address Frank Garcia 51 Country Rd 630 A. Frostproof FL 33843 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$207.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.145</div> Nonpriority creditor's name and mailing address Frank Schumacher 825 5th Ave NE Jamestown ND 58401 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$231.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.146</div> Nonpriority creditor's name and mailing address Frank Smith 855 Chestnut Rd Millville PA 17846 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$322.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.147</div> Nonpriority creditor's name and mailing address Frank Walker 4322 Henryanna Idaho Falls ID 73404 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$938.29
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.148</div> Nonpriority creditor's name and mailing address Gabreil Paolieri 146 Lirios Ave Sacramento CA 95828 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$207.49

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<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.149</div>	Nonpriority creditor's name and mailing address <u>Galen Smith</u> <u>3926 Trevor Ave</u> <u>Cheviot</u> <u>OH</u> <u>45211</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$19.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.150</div>	Nonpriority creditor's name and mailing address <u>Gary Adkison</u> <u>PO Box 873</u> <u>Craig</u> <u>AK</u> <u>99921</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$289.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.151</div>	Nonpriority creditor's name and mailing address <u>Gary Collison</u> <u>44111 SE Tapp Rd</u> <u>Sandy</u> <u>OR</u> <u>97055</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$315.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.152</div>	Nonpriority creditor's name and mailing address <u>Gary Pegouskie</u> <u>13646 Morris Rd SE</u> <u>Yelm, WA98597</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$751.98</u>

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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.153</div>	Nonpriority creditor's name and mailing address <u>Gary Williams</u> <u>2900 FM 1478</u> <u>Lampasas TX 76550</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$636.50</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.154</div>	Nonpriority creditor's name and mailing address <u>George Chesnut</u> <u>1705 Lahola Ct</u> <u>Tracy CA 95304</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$295.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.155</div>	Nonpriority creditor's name and mailing address <u>George Goundry</u> <u>26513 SE 19th Ct</u> <u>Sammamish WA 98075</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,189.96</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.156</div>	Nonpriority creditor's name and mailing address <u>George Houchens</u> <u>11356 Tall Shadows Ct</u> <u>Pinckney MI 98169</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$283.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.157</div> Nonpriority creditor's name and mailing address Gerald Lang 415 Cherokee Meadows Rd Livermore CO 80536 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$289.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.158</div> Nonpriority creditor's name and mailing address Gerald Sensenig 102 Feick Dr. Bernville PA 19506 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$631.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.159</div> Nonpriority creditor's name and mailing address Gilbert Hilderbrand 8300 N.620 Blvd. D Suite 500 Austin TX 78732 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,127.52
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.160</div> Nonpriority creditor's name and mailing address Giulio Zaccagnini 30665 Groesbeck Hwy Roseville MI 48066 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.161</div> Nonpriority creditor's name and mailing address Giuseppe Festi Via S. Antonio 20 20 Borgo Lares TN 38078 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$560.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.162</div> Nonpriority creditor's name and mailing address Glen Mazzara 109 Goldengate Ln Oak Ridge TN 37830 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$249.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.163</div> Nonpriority creditor's name and mailing address Glenn Martin PO Box 1230 Ketchum ID 83340 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$302.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.164</div> Nonpriority creditor's name and mailing address Grant Casey 11825 Elkhart st Brighton CO 80603 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$735.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.165</div>	Nonpriority creditor's name and mailing address <u>Gregg Jensen</u> <u>9546 SW Happy Days Lane</u> <u>Powell Butte</u> <u>OR</u> <u>97753</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,081.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.166</div>	Nonpriority creditor's name and mailing address <u>Gudvin Skogen</u> <u>19 Shea Way Ste 308</u> <u>Newark</u> <u>DE</u> <u>19713</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,037.19</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.167</div>	Nonpriority creditor's name and mailing address <u>Hampton Spivey</u> <u>4697 Huntingwood Rd</u> <u>Ramseur</u> <u>NC</u> <u>27316</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$574.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.168</div>	Nonpriority creditor's name and mailing address <u>Hanyang Liu</u> <u>63 Hurlingham Cres</u> <u>North York, ON M3B 2P9</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,463.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.169</div> Nonpriority creditor's name and mailing address Harley Gardner PO Box 98 Dove Creek CO 81324 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$322.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.170</div> Nonpriority creditor's name and mailing address Harry Santora 14 Caldera Place Staten Island NY 10301 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$301.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.171</div> Nonpriority creditor's name and mailing address Hugh English PO Box 11964 Roanake VA 24022-1964 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$531.98
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.172</div> Nonpriority creditor's name and mailing address Ion Burdun 8531 134A Ave NW Edmonton, AB T5E 1L6 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$512.50

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.173</div>	Nonpriority creditor's name and mailing address IPFS Corporation PO Box 32144 New York NY 10087-2144 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,753.47
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.174</div>	Nonpriority creditor's name and mailing address Jacob Nwshaney 628 E. Penrose Ave Post Falls ID 83854 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,179.00
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.175</div>	Nonpriority creditor's name and mailing address Jake Daleo 4665 Washington Blvd. Beaumont TX 77707 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$271.70
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.176</div>	Nonpriority creditor's name and mailing address James Flores 207 Wampum Way Seguin TX 78155 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$248.96

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.177</div>	Nonpriority creditor's name and mailing address <u>James Gorman</u> <u>654 Hill Rd</u> <u>Boxborough</u> <u>MA</u> <u>01719</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$460.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.178</div>	Nonpriority creditor's name and mailing address <u>James Harryman</u> <u>801 Mitchell Ct</u> <u>Cheyenne</u> <u>WY</u> <u>82007</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$322.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.179</div>	Nonpriority creditor's name and mailing address <u>James Holleran</u> <u>4780 PA 287</u> <u>Wellsboro</u> <u>PA</u> <u>16901</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$583.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.180</div>	Nonpriority creditor's name and mailing address <u>James Hurt</u> <u>9620 Leeta Cornus Ln</u> <u>Nokesville</u> <u>VA</u> <u>20181</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$499.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.181</div>	Nonpriority creditor's name and mailing address <u>James Kane</u> <u>7301 E. Montebello Ave</u> <u>Scottsdale</u> <u>AZ</u> <u>85250</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$451.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.182</div>	Nonpriority creditor's name and mailing address <u>James Keeney</u> <u>6116 Mistwood Ln</u> <u>Rapidan</u> <u>VA</u> <u>22733</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$597.89</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.183</div>	Nonpriority creditor's name and mailing address <u>James Martin</u> <u>10072 Ecton Ln</u> <u>Jacksonville</u> <u>FL</u> <u>32246-1884</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$207.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.184</div>	Nonpriority creditor's name and mailing address <u>James Mitchell</u> <u>1449 Andrews St. NW</u> <u>Hartville</u> <u>OH</u> <u>44632</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$315.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.185</div>	Nonpriority creditor's name and mailing address <u>James Morehouse</u> <u>2327 Walker Ln</u> <u>Keokuk</u> <u>IA</u> <u>52632</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$506.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.186</div>	Nonpriority creditor's name and mailing address <u>James Richards</u> <u>7663 harrier Hill Rd</u> <u>Signal Mtn</u> <u>TN</u> <u>37399</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$599.90</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.187</div>	Nonpriority creditor's name and mailing address <u>James Steward</u> <u>275 Strawn Dr.</u> <u>Boaz</u> <u>AL</u> <u>35957</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$345.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.188</div>	Nonpriority creditor's name and mailing address <u>James Trimm</u> <u>4316 Paxton Way</u> <u>Birmingham</u> <u>AL</u> <u>35242</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,149.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.189</div>	Nonpriority creditor's name and mailing address <u>James Webb</u> <u>2201 W. Expressway 83</u> <u>McAllen</u> <u>TX</u> <u>78503</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$255.46</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.190</div>	Nonpriority creditor's name and mailing address <u>Jason Acquistapace</u> <u>1314 Philbric</u> <u>Santa Maria</u> <u>CA</u> <u>93454</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$452.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.191</div>	Nonpriority creditor's name and mailing address <u>Jason Boatright</u> <u>2908 Dyer St</u> <u>Dallas</u> <u>TX</u> <u>75205</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$638.66</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.192</div>	Nonpriority creditor's name and mailing address <u>Jason Hoeft</u> <u>3447 SW Juniper Ave</u> <u>Redmond</u> <u>OR</u> <u>97756</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.49</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.193</div>	Nonpriority creditor's name and mailing address <u>Jason Rozell</u> <u>PO Box 78</u> <u>South Montrose</u> <u>PA</u> <u>18843</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$240.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.194</div>	Nonpriority creditor's name and mailing address <u>Jay Strass</u> <u>551 Rockcrusher Rd</u> <u>Lexington</u> <u>NC</u> <u>27292</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$301.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.195</div>	Nonpriority creditor's name and mailing address <u>Jcques Shepperson</u> <u>232 E. Java Dr.</u> <u>Sunnyvale</u> <u>CA</u> <u>94089</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$299.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.196</div>	Nonpriority creditor's name and mailing address <u>Jeff Buler</u> <u>2 Indian Pipe</u> <u>Trabuco Canyon</u> <u>CA</u> <u>92679</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$393.49</u>

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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.197</div> Nonpriority creditor's name and mailing address <u>Jeff Connor</u> <u>PO Box 85086</u> <u>Fairbanks</u> <u>AK</u> <u>99708</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$599.99</u>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.198</div> Nonpriority creditor's name and mailing address <u>Jeff Roberson</u> <u>7404 Sinclair St</u> <u>Amarillo</u> <u>TX</u> <u>79119</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employment and Equity</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Is owed unpaid salary, and the value of his 100% interest in the company, which is not know at the present

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.199</div> Nonpriority creditor's name and mailing address <u>Jeff Rovinsky</u> <u>25792 Prairestone Dr.</u> <u>Laguna Hills</u> <u>CA</u> <u>92653</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.49</u>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.200</div> Nonpriority creditor's name and mailing address <u>Jeff Solberg</u> <u>50851 County 59 Blvd.</u> <u>Kenyon</u> <u>MN</u> <u>55946</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$912.99</u>
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Debtor **Roberson Cartridge Co., LLC**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.201</div> Nonpriority creditor's name and mailing address Jeffrey Citron 517 Beach Rd Hobe Sound FL 33455 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$232.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.202</div> Nonpriority creditor's name and mailing address Jeffrey Doyle 561 County Rd 4906 Troup TX 75789 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,128.47
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.203</div> Nonpriority creditor's name and mailing address Jeffrey Keenan 23721 NE 48th Ave Cabin H7 Okeechobee FL 34972 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,786.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.204</div> Nonpriority creditor's name and mailing address Jeffrey Mckelvy 12463 Caprock Crk San Antonio TX 78254 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$356.13

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.205</div>	Nonpriority creditor's name and mailing address <u>Jerome Wilk</u> <u>506 Saint St.</u> <u>Richland</u> <u>WA</u> <u>99354-1836</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$506.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.206</div>	Nonpriority creditor's name and mailing address <u>Jerrell Mitchell</u> <u>80 Broom Rd</u> <u>Pleasanton</u> <u>TX</u> <u>78064</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$344.22</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.207</div>	Nonpriority creditor's name and mailing address <u>Jerry Adkins</u> <u>3547 State Route 44</u> <u>Rootstown</u> <u>OH</u> <u>44272</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$229.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.208</div>	Nonpriority creditor's name and mailing address <u>Jerry Gilcrease</u> <u>14 El Arco Iris Dr.</u> <u>Roswell</u> <u>NM</u> <u>88201</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$268.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.209</div> Nonpriority creditor's name and mailing address Jerry Noblin 10709 Wesley Circle Oklahoma City OK 73151 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,842.48
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.210</div> Nonpriority creditor's name and mailing address Jerry Rhodes PO Box 97 Beggs OK 74421 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$403.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.211</div> Nonpriority creditor's name and mailing address Jethro Allen 13581 Westside Calispell Rd Usk WA 99180 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$347.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.212</div> Nonpriority creditor's name and mailing address Jim Phraner 30-35 Williams St. Walton NY 13856 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$320.99

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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.213</div> Nonpriority creditor's name and mailing address Joe Hancock 10803 Teton Ln San Antonio TX 78230 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.92
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.214</div> Nonpriority creditor's name and mailing address Joe Yoder 35801E 275th St Garden City MO 64747 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$260.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.215</div> Nonpriority creditor's name and mailing address Johannas Kalle 93 Ave D Holbrook NY 11741 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$255.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.216</div> Nonpriority creditor's name and mailing address John Baker PO Box 10507 Fort Smith AR 72917 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$778.00

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.217</div>	Nonpriority creditor's name and mailing address <u>John Buhay</u> <u>955 Wollups Hill Rd #17</u> <u>Stevens</u> <u>PA</u> <u>17578</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$711.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.218</div>	Nonpriority creditor's name and mailing address <u>John Casagrande</u> <u>525 Maple Ave</u> <u>South San Francisco</u> <u>VA</u> <u>94080</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$627.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.219</div>	Nonpriority creditor's name and mailing address <u>John Cassady</u> <u>944 Winona Dr.</u> <u>Mandeville</u> <u>LA</u> <u>70471</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$274.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.220</div>	Nonpriority creditor's name and mailing address <u>John Davidson</u> <u>1826 McCoy Rd</u> <u>Bear</u> <u>DE</u> <u>19701</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$403.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.221</div>	Nonpriority creditor's name and mailing address <u>John Desjardins</u> <u>2 Marseille</u> <u>Montgomery TX 77356</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$349.10</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.222</div>	Nonpriority creditor's name and mailing address <u>John Gibson</u> <u>3015 HoufnaggleRd</u> <u>Lewisburg WV 24901</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$324.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.223</div>	Nonpriority creditor's name and mailing address <u>John Goetz</u> <u>110 Springhouse Dr.</u> <u>Butler PA 16001</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$439.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.224</div>	Nonpriority creditor's name and mailing address <u>John Hutchinson</u> <u>8 Saint Marks Close</u> <u>Thatcham, Bershire RG19 3SZ</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$340.49</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.225</div>	Nonpriority creditor's name and mailing address <u>John Mahathy</u> <u>14880 Mosley Rd</u> <u>Stapleton</u> <u>AL</u> <u>36578</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$506.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.226</div>	Nonpriority creditor's name and mailing address <u>John Marcus</u> <u>2301 Federal Ave</u> <u>Los Angeles</u> <u>CA</u> <u>90064</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$520.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.227</div>	Nonpriority creditor's name and mailing address <u>John Mills</u> <u>69 Illinois Ave Suite 5</u> <u>Warwick</u> <u>RI</u> <u>02888</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$269.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.228</div>	Nonpriority creditor's name and mailing address <u>John Noble</u> <u>204 Grove St</u> <u>Wellesley</u> <u>MA</u> <u>02482</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$40.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.229</div>	Nonpriority creditor's name and mailing address <u>John Nuff</u> <u>PO Box 261</u> <u>Bay Center</u> <u>WA</u> <u>98527</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$324.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.230</div>	Nonpriority creditor's name and mailing address <u>John Piazza</u> <u>1114 Grove St</u> <u>Williamsport</u> <u>PA</u> <u>17701</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$352.90</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.231</div>	Nonpriority creditor's name and mailing address <u>John Plumlee</u> <u>18128 Business 13</u> <u>Unit 2074</u> <u>Reeds Spring</u> <u>MO</u> <u>65737</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$468.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.232</div>	Nonpriority creditor's name and mailing address <u>John Witherspoon</u> <u>4075 Elmridge Rd</u> <u>Kettering</u> <u>OH</u> <u>45429</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$303.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.233</div>	Nonpriority creditor's name and mailing address <u>Jon Durbin</u> <u>2260 Browns Creek Rd</u> <u>Greysville</u> <u>PA</u> <u>15337</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$701.59</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.234</div>	Nonpriority creditor's name and mailing address <u>Jonathan Hansen</u> <u>2212 Livingston Ave</u> <u>Missoula</u> <u>MT</u> <u>59801</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$260.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.235</div>	Nonpriority creditor's name and mailing address <u>Jonathan Reyes</u> <u>4 Shady Lane</u> <u>Danville</u> <u>IL</u> <u>61832</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,423.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.236</div>	Nonpriority creditor's name and mailing address <u>Jonathan Reyes</u> <u>1305 Paseo Dorado</u> <u>San Dims</u> <u>CA</u> <u>91773</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,423.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.237</div> Nonpriority creditor's name and mailing address Joseph Buffington 36320 46th Ave East Eatonville WA 98328 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$259.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.238</div> Nonpriority creditor's name and mailing address Joseph Meibergen 2 Pebble Dr. Enid OK 73703 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$484.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.239</div> Nonpriority creditor's name and mailing address Joseph Rigler PO Box 1002 Rolla MO 65402 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$389.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.240</div> Nonpriority creditor's name and mailing address Joseph Ruffolo 1112 Leisha Ln Kalispell, MY 599001 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$208.99
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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.241</div>	Nonpriority creditor's name and mailing address <u>Joseph Sudduth</u> <u>8400 County Road 35</u> <u>Ethelsville</u> <u>AL</u> <u>35461</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$345.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.242</div>	Nonpriority creditor's name and mailing address <u>Joseph Vasques</u> <u>330 Bellows Rd Box 130</u> <u>Fleischmanns</u> <u>NY</u> <u>12430</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$829.98</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.243</div>	Nonpriority creditor's name and mailing address <u>Joseph Watkins</u> <u>10011 NW Hwy 225a</u> <u>Ocala</u> <u>FL</u> <u>34482</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$304.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.244</div>	Nonpriority creditor's name and mailing address <u>Joshua Mignot</u> <u>2345 Charleston Dr.</u> <u>State College</u> <u>PA</u> <u>16801</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$291.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.245</div> Nonpriority creditor's name and mailing address Joshua Perleberg 2849 73rd Ave SE Buchanan ND 58420 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$507.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.246</div> Nonpriority creditor's name and mailing address Joshua Shipley 693 Eugenia Td Vero beach FL 32963 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$391.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.247</div> Nonpriority creditor's name and mailing address Jr Watkins 1012 Montclair Ct Bowling Green KY 42103 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$299.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.248</div> Nonpriority creditor's name and mailing address Karel Janda Krajkov 281 281 Krajкова 281 35708 Czechia Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$429.99
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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.249</div>	Nonpriority creditor's name and mailing address Katie Vandeusen 511 Mayfair Lane Suite 250 Naperville IL 60565 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$267.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.250</div>	Nonpriority creditor's name and mailing address Keith Balderston 33437 Hampton Rd Eugene OR 97405 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$235.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.251</div>	Nonpriority creditor's name and mailing address Kelly Barnes N14203 Northway Dr Amberg WI 54102 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244.65
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.252</div>	Nonpriority creditor's name and mailing address Ken Oilschlager 303 Fox Hollow Canton, MC 39046 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$304.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.253</div>	Nonpriority creditor's name and mailing address Ken Swenson PO Box 294 Orangefield TX 77639 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$282.52
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.254</div>	Nonpriority creditor's name and mailing address Kendall Rinne 26682 Hamburger Hill Rd Concordia MO 64020 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$431.99
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.255</div>	Nonpriority creditor's name and mailing address Kenneth Tuckwell 30460 Deer Creek Rd Ashland WI 54806 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$302.49
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.256</div>	Nonpriority creditor's name and mailing address Kent Davenport 4340 Aukai Ave Honolulu HI 96816 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$487.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.257</div> Nonpriority creditor's name and mailing address Kent Doane 2818 Hanpton Arbor Circle Chesterfield VA 23832 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$403.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.258</div> Nonpriority creditor's name and mailing address Ketema Harris 507 Granite Circle Chuluota FL 32766 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$235.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.259</div> Nonpriority creditor's name and mailing address Kevin Coulter 167 Ski Hill Rd Bethany, ON L0A Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$181.00
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.260</div> Nonpriority creditor's name and mailing address Kevin Fransen 2738 CR 152 Kenedy TX 78119 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$519.59
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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.261</div> <div style="display: inline-block; vertical-align: top;"> <p>Nonpriority creditor's name and mailing address</p> <p>Kevin Herrick</p> <p>3810 Foxglove Ln</p> <p>Winnebago IL 61088</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> </div>	<p>As of the petition filing date, the claim is: \$300.49</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Unsecured</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.262</div> <div style="display: inline-block; vertical-align: top;"> <p>Nonpriority creditor's name and mailing address</p> <p>Kevin Homa</p> <p>18 Run St</p> <p>Pittsburghcarnegie PA 15106</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> </div>	<p>As of the petition filing date, the claim is: \$439.99</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Unsecured</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.263</div> <div style="display: inline-block; vertical-align: top;"> <p>Nonpriority creditor's name and mailing address</p> <p>Kevin Knowles</p> <p>18518 48th St NE</p> <p>Snohomish WA 98290</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> </div>	<p>As of the petition filing date, the claim is: \$239.99</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Unsecured</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.264</div> <div style="display: inline-block; vertical-align: top;"> <p>Nonpriority creditor's name and mailing address</p> <p>Kevin Null</p> <p>PO Box 756</p> <p>Ackerman MS 39735</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> </div>	<p>As of the petition filing date, the claim is: \$1,584.97</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Unsecured</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.265</div>	Nonpriority creditor's name and mailing address <u>Kirby Evans</u> <u>230 Harmon Rd</u> <u>Marshall TX 75672</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$378.86</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.266</div>	Nonpriority creditor's name and mailing address <u>Kirby Voegete</u> <u>300 N. Main</u> <u>PO Box 206</u> <u>Watford City ND 58854</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$322.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.267</div>	Nonpriority creditor's name and mailing address <u>Kirk McCormick</u> <u>4940 Sunbird Cliffs Dr.</u> <u>Colorado Springs CO 80919</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$317.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.268</div>	Nonpriority creditor's name and mailing address <u>Konstantinos Diamadis</u> <u>Leof Anabissoy 45 km</u> <u>Kalivia, I 19010</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$567.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.269</div>	Nonpriority creditor's name and mailing address Kristi Ponczak 9371 E. Maple Dr. Scottsdale AZ 85255 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$929.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.270</div>	Nonpriority creditor's name and mailing address Kyle Lewis 30303 18th Ave SW Federal Way WA 98023 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$273.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.271</div>	Nonpriority creditor's name and mailing address Kyle Yu 10 Helen Ave Vaughn ON L4J 1J7 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$372.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.272</div>	Nonpriority creditor's name and mailing address Lance Dorin 3181 Hungarytown Rd Blackstone VA 23824 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$303.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.273</div>	Nonpriority creditor's name and mailing address <u>Larry Burdge</u> <u>518 Chitwood Rd</u> <u>Baldwin</u> <u>GA</u> <u>30511</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$414.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.274</div>	Nonpriority creditor's name and mailing address <u>Lee Inglis</u> <u>525 Yarrowonga Rd</u> <u>Benalla, VIC 3672</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$269.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.275</div>	Nonpriority creditor's name and mailing address <u>Leon Kranen</u> <u>Past. Knippenberghstr.62</u> <u>Helden, NA 5988 CW</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$284.50</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.276</div>	Nonpriority creditor's name and mailing address <u>Leslie Bowes</u> <u>PO Box 872</u> <u>Portage Lw Prairie, MB R1N 3C3</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$199.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.277</div>	Nonpriority creditor's name and mailing address Lester Mathews 2311 Pine Tree Dr. Taylorville IL 62568 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$266.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.278</div>	Nonpriority creditor's name and mailing address Levi Ross 181 Raven Rd Port Townsend VA 98368 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.279</div>	Nonpriority creditor's name and mailing address Linde Gas and Equipment Dept 0889 PO Box 120889 Dallas TX 75312-0889 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Interest Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14.55
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.280</div>	Nonpriority creditor's name and mailing address Lonny Hytrek 445 SW 24th St Ontario OR 97914 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$328.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.281</div>	Nonpriority creditor's name and mailing address <u>Louis Braddi</u> <u>15387 Robin Anne Lane</u> <u>Monte Sereno</u> <u>CA</u> <u>95030</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$580.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.282</div>	Nonpriority creditor's name and mailing address <u>Lourens Havenga</u> <u>9050 Wildcat Rd</u> <u>Loveland</u> <u>CO</u> <u>80538</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$306.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.283</div>	Nonpriority creditor's name and mailing address <u>Lovas Peter</u> <u>Kisfaludy u. 11</u> <u>Balatonalmedi, VE 8220</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,103.00</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.284</div>	Nonpriority creditor's name and mailing address <u>Mark Becker</u> <u>6221 West Valley View Dr.</u> <u>Mountain Green</u> <u>UT</u> <u>84050</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$323.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.285</div>	Nonpriority creditor's name and mailing address <u>Mark Burns</u> <u>86 W. Whipp Rd</u> <u>Dayton</u> <u>OH</u> <u>45459</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.286</div>	Nonpriority creditor's name and mailing address <u>Mark Coates</u> <u>118 Farrell Bay</u> <u>Ft. McMurray, AB T9K 1N8</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$330.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.287</div>	Nonpriority creditor's name and mailing address <u>Mark Cordeiro</u> <u>2500 Oxford Ave</u> <u>Turlock</u> <u>CA</u> <u>95382</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$235.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.288</div>	Nonpriority creditor's name and mailing address <u>Mark Daly</u> <u>614 E. 24th St</u> <u>Cheyenne</u> <u>WY</u> <u>82001</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$216.49</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.289</div>	Nonpriority creditor's name and mailing address <u>Mark Goldstein</u> <u>3146 N. Southport Ave</u> <u>Apt 1</u> <u>Chicago</u> <u>IL</u> <u>60657</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$19.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.290</div>	Nonpriority creditor's name and mailing address <u>Mark Gulbrandson</u> <u>7338 N. Mystic Canyon Dr.</u> <u>Tucson</u> <u>AZ</u> <u>85718</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$943.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.291</div>	Nonpriority creditor's name and mailing address <u>Mark Herfort</u> <u>2200 Avenue H</u> <u>Rosenburg</u> <u>TX</u> <u>77471</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$386.66</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.292</div>	Nonpriority creditor's name and mailing address <u>Mark Lembke</u> <u>23910 Sun Coumdry Lane</u> <u>Rapid City</u> <u>SD</u> <u>57702</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$631.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.293</div>	Nonpriority creditor's name and mailing address Mark McDonald 11430 Rist Canyon Rd Bellvue CO 80512 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$313.49
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.294</div>	Nonpriority creditor's name and mailing address Mark Raymond 4000 Pierce St 137 Riverside CA 92505 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$273.99
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.295</div>	Nonpriority creditor's name and mailing address Mark Wilkinson 8 Cullen Rd Huntington MA 01050 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$519.99
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.296</div>	Nonpriority creditor's name and mailing address Mark Wood 3552 Hazel Grove Regina, SK S4V 2S7 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$405.00

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.297</div>	Nonpriority creditor's name and mailing address Marshall Field 551 5th Ave Suite 2800 New York NY 10176 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,359.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.298</div>	Nonpriority creditor's name and mailing address Martin Wade 40 Hickory Lane Watertown TN 37184 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$294.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.299</div>	Nonpriority creditor's name and mailing address Marvin Hines 18883 W. Havasupia Dr. Casa Grande AZ 85122 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$205.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.300</div>	Nonpriority creditor's name and mailing address Marvin Quillen 1005 irene Dr. Mesquite TX 75149 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$369.12

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.301</div>	Nonpriority creditor's name and mailing address <u>Mathew Macphail</u> <u>225 Street 3018</u> <u>Bellevue, AB T0K 0C0</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$309.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.302</div>	Nonpriority creditor's name and mailing address <u>Matt Banholzer</u> <u>PO Box 265</u> <u>Rolla</u> <u>MO</u> <u>65402</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$612.50</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.303</div>	Nonpriority creditor's name and mailing address <u>Matt Calkins</u> <u>9372 Vista Hill Way</u> <u>Lone Tree</u> <u>CO</u> <u>80124</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,511.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.304</div>	Nonpriority creditor's name and mailing address <u>Matt Kpooipz</u> <u>5318 S. Winsor Dr.</u> <u>Battlefield</u> <u>MO</u> <u>65619</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$557.89</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.305</div> Nonpriority creditor's name and mailing address Matthew Blackall 162 W. King Arthur Ct Palatine IL 60067 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,094.98
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.306</div> Nonpriority creditor's name and mailing address Matthew Braun 9652 Yorkshire Estates St St. Louis MO 63126 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$840.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.307</div> Nonpriority creditor's name and mailing address Matthew Kurtz 2312 Steamboat Hollow Lane Wildwood MO 63038 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$339.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.308</div> Nonpriority creditor's name and mailing address Matthew Slover 322 Barnes Lane Butler KY 41006 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$423.19

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.309</div> Nonpriority creditor's name and mailing address Maurice Taylor 32610 Autumn Forest Ct Magnolia TX 77354 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$652.20
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.310</div> Nonpriority creditor's name and mailing address Max Liggett 874 Country Lane Houston TX 77024 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$424.33
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.311</div> Nonpriority creditor's name and mailing address Melissa Kish 1968 Mars Hill Rd Irwin PA 15642 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$288.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.312</div> Nonpriority creditor's name and mailing address Michael Arseneault 4645 E. Coachlight Ln Tucson AZ 85718 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$387.19

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.313</div>	Nonpriority creditor's name and mailing address Michael Blair 10415 S. Settlers Bend Rd South Jordan UT 84095 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,035.98
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.314</div>	Nonpriority creditor's name and mailing address Michael Carter 1333 Sanden Ferry Dr. Decatur GA 30033 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$389.99
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.315</div>	Nonpriority creditor's name and mailing address Michael Erdman 1520 Encino Dr. Escondido CA 92025 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$657.98
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.316</div>	Nonpriority creditor's name and mailing address Michael Hardin 7415 E. Calico Trail Orange CA 92869 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$494.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.317</div>	Nonpriority creditor's name and mailing address <u>Michael Haring</u> <u>5021 Justin St, Suite B</u> <u>Nacogdoches TX 75965</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$312.83</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.318</div>	Nonpriority creditor's name and mailing address <u>Michael Hicks</u> <u>3909 Hwy 97</u> <u>Molino FL 32577</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.319</div>	Nonpriority creditor's name and mailing address <u>Michael Hubert</u> <u>11400 Will CLayton Parkway</u> <u>#2204</u> <u>Humble TX 77346</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$376.16</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.320</div>	Nonpriority creditor's name and mailing address <u>Michael Irwin</u> <u>8794 Elmburg Rd</u> <u>Bagdad KY 40003</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$267.49</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.325</div>	Nonpriority creditor's name and mailing address <u>Michael Totta</u> <u>12652 Hubbard St</u> <u>Sylmar</u> <u>CA</u> <u>91342</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$365.24</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.326</div>	Nonpriority creditor's name and mailing address <u>Michael Valek</u> <u>3274 E. Loas Altos Rd</u> <u>Gilbert</u> <u>AZ</u> <u>85297</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$569.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.327</div>	Nonpriority creditor's name and mailing address <u>Michael Watcher</u> <u>1650 Appaloosa Dr.</u> <u>Sumter</u> <u>SC</u> <u>29154</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$349.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.328</div>	Nonpriority creditor's name and mailing address <u>Michael Watson</u> <u>3680 Randall St</u> <u>Jacksonville</u> <u>FL</u> <u>32205</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$434.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.329</div> Nonpriority creditor's name and mailing address Michal Hyrlik 101 Morning Dove Court Argyle TX 76226 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$762.72
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.330</div> Nonpriority creditor's name and mailing address Mike Read 170 Balmoral Rd Risdon Park Port Pirie,SA 5540 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$515.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.331</div> Nonpriority creditor's name and mailing address Mike Wood PO Box 773 Talkeetna AK 99616 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$567.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.332</div> Nonpriority creditor's name and mailing address Mike Wood 2732 S 820 W Perry UT 84302 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,139.98

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.333</div>	Nonpriority creditor's name and mailing address Miles Crandall 6405 53rd ave Ponoka, AB T4J 1T9	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$580.00
		Basis for the claim: Unsecured	
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.334</div>	Nonpriority creditor's name and mailing address Mitch Seil 3291 Wilson Creek Rd	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$268.99
		Basis for the claim: Unsecured	
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.335</div>	Nonpriority creditor's name and mailing address Mitchell Morrison 61 Sunnydale Court	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$327.49
		Basis for the claim: Unsecured	
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.336</div>	Nonpriority creditor's name and mailing address Nathaniel Kuhle 534 S. Washington St	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$552.49
		Basis for the claim: Unsecured	
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.337</div> Nonpriority creditor's name and mailing address Nicholas Tuzzio 516 Long Beach Rd Island Park NY 11558 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.338</div> Nonpriority creditor's name and mailing address Nick Keske 9322 45th Ave N New Hope MN 55428 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$288.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.339</div> Nonpriority creditor's name and mailing address Nick Marculescu 36 Henley Dr St. Catharines, ON L2N 4A9 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$294.00
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.340</div> Nonpriority creditor's name and mailing address Oscar Campos Rua Dr. Prior Cura Racho N 46 Agueda, NA 03750 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$559.00
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Amount of claim

<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">3.341</div> Nonpriority creditor's name and mailing address Pat Jenkins 2931 Driftwood Ln Rock Springs WY 82901 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$599.99
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">3.342</div> Nonpriority creditor's name and mailing address Pat Rucker 90 Olympic Wetumpaka AL 36093 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,079.99
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">3.343</div> Nonpriority creditor's name and mailing address Patrick Lagerstedt 244 Fisher Dr. Sweden PA 16915 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$303.55
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">3.344</div> Nonpriority creditor's name and mailing address Patrick Mcdunn 25 Franklin St Warren PA 16365 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$459.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.345</div>	Nonpriority creditor's name and mailing address Paul Birmingham PO Box 1174 Waterford CA 95386 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$447.98
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.346</div>	Nonpriority creditor's name and mailing address Paul Braden 6404 W. Buttercup Unit A USAF Academy CO 80840 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$597.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.347</div>	Nonpriority creditor's name and mailing address Paul Hoenke 3351 Hwy 2921 De Leon TX 76444 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$356.13
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.348</div>	Nonpriority creditor's name and mailing address Paul Patterson 900 Kings Point Court Modesto CA 95355 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$252.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.349</div> Nonpriority creditor's name and mailing address Paul Post 70265 Country Rd 18 Scottsbluff NE 69361 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$459.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.350</div> Nonpriority creditor's name and mailing address Paul Schydowski Blinge 552 Adressrad 2 Orkelljunga, NA 28691 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$665.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.351</div> Nonpriority creditor's name and mailing address Peter Garrson 37 Coleman Ave East Chatham NJ 07928 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$377.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.352</div> Nonpriority creditor's name and mailing address Peter Janssen 100 Fruit St Peru IL 61354 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$768.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.353</div>	Nonpriority creditor's name and mailing address Peter Sharp PO Box 15 Weton VT 05161 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,519.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.354</div>	Nonpriority creditor's name and mailing address Phill Stoker PO Box 54 Corvallis MT 59828 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$326.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.355</div>	Nonpriority creditor's name and mailing address Phillip Netznik 22657 S. Spencer Rd New Lenox IL 60451 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,023.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.356</div>	Nonpriority creditor's name and mailing address Phillip Sample 25 Conley Dr. Florak AR 72534 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$297.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.357</div> Nonpriority creditor's name and mailing address Pierre Burkett 2763 N. 49th State St. Palmer AK 99645 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$457.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.358</div> Nonpriority creditor's name and mailing address Pieter Van Jaarsveld 519 S. Rd 90 W Rexford KS 67753 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.359</div> Nonpriority creditor's name and mailing address Preston Stotts 36555 Flight Bound Ave Sterling AK 99672 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$381.19
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.360</div> Nonpriority creditor's name and mailing address Pro Martusheff PO Box 870636 Wasilla AK 99687 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,528.58

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.361</div>	Nonpriority creditor's name and mailing address <u>Quenten Cole</u> <u>152 Locke Cutoff Rd</u> <u>Cusick</u> <u>WA</u> <u>99199</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$336.66</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.362</div>	Nonpriority creditor's name and mailing address <u>Ralph Granzin</u> <u>707 Sheryl Ln</u> <u>Longview</u> <u>TX</u> <u>75604</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$378.88</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.363</div>	Nonpriority creditor's name and mailing address <u>Ralph Linaweaver</u> <u>275 Wilson Mill Rd</u> <u>Oxford</u> <u>PA</u> <u>19363</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$367.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.364</div>	Nonpriority creditor's name and mailing address <u>Ralph Wong</u> <u>PO Box 99</u> <u>Marana</u> <u>AZ</u> <u>85653</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$345.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.365</div> Nonpriority creditor's name and mailing address Randall Kaufman 4111 University Dr Coral Gables FL 33146 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,071.24
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.366</div> Nonpriority creditor's name and mailing address Randall Sanderson 450 Lamar Rd Guin AL 35563 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$328.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.367</div> Nonpriority creditor's name and mailing address Randy Long 207 La Jolla Dr. Newport Beach CA 92663 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$633.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.368</div> Nonpriority creditor's name and mailing address Randy Riles 1307 N. Canal Carlsbad NM 88220 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$260.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.369</div>	Nonpriority creditor's name and mailing address <u>Ranid May</u> <u>25064 Hall Rd</u> <u>Cheshire</u> <u>OR</u> <u>97419</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$210.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.370</div>	Nonpriority creditor's name and mailing address <u>Raymond Piatedose</u> <u>2174 W. County Rd 500 N</u> <u>Shelburn</u> <u>IN</u> <u>47879</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$289.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.371</div>	Nonpriority creditor's name and mailing address <u>Reese Ande</u> <u>8008 NE West Port Madison Rd</u> <u>Bainbridge Island</u> <u>WA</u> <u>98110</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$297.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.372</div>	Nonpriority creditor's name and mailing address <u>Rene Kromes</u> <u>Dorfstrasse 11</u> <u>Stopfenreuth, NA 2292</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,880.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.373</div>	Nonpriority creditor's name and mailing address <u>Rich Spagna</u> <u>6711 Dublin Center Dr.</u> <u>Dublin</u> <u>OH</u> <u>43017</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$697.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.374</div>	Nonpriority creditor's name and mailing address <u>Richard Cotton</u> <u>PO Box 39</u> <u>Kipling</u> <u>NC</u> <u>27543</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$995.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.375</div>	Nonpriority creditor's name and mailing address <u>Richard Coxall</u> <u>33895 Calle Acordarse</u> <u>San Juan Capistrano</u> <u>CA</u> <u>92675</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$439.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.376</div>	Nonpriority creditor's name and mailing address <u>Richard Duffy</u> <u>5811 Flowing Springs Rd</u> <u>Shenandoah Junction</u> <u>WV</u> <u>25442</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$235.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.377</div>	Nonpriority creditor's name and mailing address Richard Hurst 4464 S. 6700 W Hooper UT 84315 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$599.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.378</div>	Nonpriority creditor's name and mailing address Richard Long 301 Iverleigh Ln Jacksonville NC 28540 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$278.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.379</div>	Nonpriority creditor's name and mailing address Richard Long 2522 Leichester Spring TX 77386 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$305.80
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.380</div>	Nonpriority creditor's name and mailing address Richard Taylor 25077 Great Cove Rd McConnellsburg PA 17233 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$263.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.381</div>	Nonpriority creditor's name and mailing address <u>Rob Cooper</u> <u>2940 Mustang Dr</u> <u>New Bren</u> <u>NC</u> <u>28562</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$474.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.382</div>	Nonpriority creditor's name and mailing address <u>Rob Mccy</u> <u>12176 Tipton Hwy</u> <u>Tipton</u> <u>MI</u> <u>49287</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$579.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.383</div>	Nonpriority creditor's name and mailing address <u>Robert Armstrong</u> <u>1007 Colony Dr.</u> <u>New Bren</u> <u>NC</u> <u>28562</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$474.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.384</div>	Nonpriority creditor's name and mailing address <u>Robert Avila</u> <u>PO Box 925</u> <u>Half Moon Bay</u> <u>CA</u> <u>94019</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$561.49</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.385</div>	Nonpriority creditor's name and mailing address Robert Bass 747 Shady Hillside Rd Bozeman MT 59715 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$259.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.386</div>	Nonpriority creditor's name and mailing address Robert Harrison 2510 East Sunset Rd Suite 5-364 Las Vegas NV 89120 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$739.98
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.387</div>	Nonpriority creditor's name and mailing address Robert Kivela 305 N. Auburn Ave Eveleth MN 55734 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$966.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.388</div>	Nonpriority creditor's name and mailing address Robert Morgan II 61 Rooster Cv Brevard NC 28712 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$570.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.389</div> Nonpriority creditor's name and mailing address Robert Motheral 209 N. Myrtle Ave Monrovia CA 91016 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$626.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.390</div> Nonpriority creditor's name and mailing address Robert Parsons 184 Green Oaks Dr. Grayson KY 41143 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$490.98
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.391</div> Nonpriority creditor's name and mailing address Robert Ruhl 7961 County Road 30 Galion OH 44833 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$330.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.392</div> Nonpriority creditor's name and mailing address Robert Widdop 1036 Springhouse Dr Ambler PA 19002 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$238.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.393</div> Nonpriority creditor's name and mailing address Robert Zielke 701 Maple St. Fowler KS 67844 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$348.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.394</div> Nonpriority creditor's name and mailing address Robet Cox 123 W. Commerce, Suite 407 Altus OK 73521 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$570.99
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.395</div> Nonpriority creditor's name and mailing address Robin Foote 2/188 Norman Lesser Dr St Johns, AK 1072 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$521.00
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.396</div> Nonpriority creditor's name and mailing address Robin Foote 2/188 Norman Lesser Dr St Johns, AK 1072 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$420.00
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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.397</div>	Nonpriority creditor's name and mailing address <u>Rodney Royer</u> <u>50 Skinner Meadow Rd</u> <u>Jackson, MY 59736</u> 	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$348.99</u>
Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _			
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.398</div>	Nonpriority creditor's name and mailing address <u>Roger Jeppson</u> <u>2125 Eva Adams Dr.</u> 	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$244.99</u>
Reno NV 89509 Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _			
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.399</div>	Nonpriority creditor's name and mailing address <u>Roger Robb</u> <u>101 Picadilly Rd</u> 	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$631.99</u>
Port Matilda PA 16870 Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _			
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.400</div>	Nonpriority creditor's name and mailing address <u>Ron Hymas</u> <u>2959 W. 3825 S</u> 	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$403.99</u>
West Haven UT 84401 Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _			

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.401</div> Nonpriority creditor's name and mailing address Ron Poppe 1321 4th St Wenatchee WA 98801 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.402</div> Nonpriority creditor's name and mailing address Ron Yancey 162 L and M Trce Shelby AL 35143 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$294.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.403</div> Nonpriority creditor's name and mailing address Ronald Reu 57 Jewel Dr. Winfield MO 63389 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$291.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.404</div> Nonpriority creditor's name and mailing address Rowdy Gingerich 268 Little Bear Ln Victor MT 59875 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$322.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.409</div>	Nonpriority creditor's name and mailing address <u>Ryan Gutridge</u> <u>11880 Betts Rd</u> <u>Greenbrier</u> <u>TN</u> <u>37073</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$199.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.410</div>	Nonpriority creditor's name and mailing address <u>Ryan Maloney</u> <u>6 Lakeshore Dr.</u> <u>Newtown Square</u> <u>PA</u> <u>19073</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$288.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.411</div>	Nonpriority creditor's name and mailing address <u>Ryan Schams</u> <u>N1555 Meadow Ridge Rd</u> <u>La Crosse</u> <u>WI</u> <u>54601</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$489.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.412</div>	Nonpriority creditor's name and mailing address <u>Salvatore Palazzo</u> <u>127 Chelsea Ave</u> <u>Long Branch</u> <u>NJ</u> <u>07740</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$368.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.413</div>	Nonpriority creditor's name and mailing address Sam Schaefer 901 NE Loop 410 Suite 909 San Antonio TX 78209 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$346.39
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.414</div>	Nonpriority creditor's name and mailing address Samuel Adams 3225 Boxwood Dr Montgomery AL 36111 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$324.79
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.415</div>	Nonpriority creditor's name and mailing address Samuel Kurek 740 Orchard Rd Delta PA 17314 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$532.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.416</div>	Nonpriority creditor's name and mailing address Scott Baker PO Box 1167 Wildomar CA 92595 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$840.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.417</div>	Nonpriority creditor's name and mailing address <u>Scott Brozier</u> <u>Brozier & Buchanan Partners</u> <u>320 SW I7th</u> <u>Amarillo TX 79101</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accounting fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.418</div>	Nonpriority creditor's name and mailing address <u>Scott Crawford</u> <u>4808 West 21st Ave</u> <u>Kennewick WA 99338</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$671.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.419</div>	Nonpriority creditor's name and mailing address <u>Scott Donn</u> <u>2381 Buck Ridge Trail</u> <u>Loxahatchee FL 33470</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.420</div>	Nonpriority creditor's name and mailing address <u>Scott Lange</u> <u>730 S. Front St.</u> <u>Fort Davis TX 79734</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$222.98</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.425</div>	Nonpriority creditor's name and mailing address Sonya Reid 19321 18th Ave Ct E Spanaway WA 98387 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$198.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.426</div>	Nonpriority creditor's name and mailing address Spencer Brown 3510 James Monroe Ave Battle Mountain NV 89820 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$330.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.427</div>	Nonpriority creditor's name and mailing address Stacy Stagner 6812 Fairway Dr Vernon NY 13476 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$357.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.428</div>	Nonpriority creditor's name and mailing address Stan Peters 536 E. 2nd Ave Castle Rock CO 80108 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.429</div>	Nonpriority creditor's name and mailing address Stephen Craig 730 New Hampshire St Suite 206 Lawrence KS 66044 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$563.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.430</div>	Nonpriority creditor's name and mailing address Stephen Ireland 10841 N.140th Way Scottsdale AZ 85259 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,063.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.431</div>	Nonpriority creditor's name and mailing address Stephen Templar 203 Grander Dr Wexofrd PA 15090 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$467.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.432</div>	Nonpriority creditor's name and mailing address Steve Greer 1914 Jackson Ave Memphis TN 38107 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$253.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.433</div>	Nonpriority creditor's name and mailing address <u>Steve Keinath</u> <u>0864 County Rd 339</u> <u>Parachute</u> <u>CO</u> <u>81635</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$550.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.434</div>	Nonpriority creditor's name and mailing address <u>Steven Fox</u> <u>3 French Circle</u> <u>Pittsfield</u> <u>NH</u> <u>03263</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$412.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.435</div>	Nonpriority creditor's name and mailing address <u>Steven Harris</u> <u>715 Grand Ave</u> <u>Ardmore</u> <u>OK</u> <u>73401</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$242.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.436</div>	Nonpriority creditor's name and mailing address <u>Steven Warner</u> <u>9100 Calera Drive, Unit 4</u> <u>Austin</u> <u>TX</u> <u>78735</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$244.63</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.437</div> Nonpriority creditor's name and mailing address Stewart Clark 730 Horseneck Road Waverly WV 26184 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$409.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.438</div> Nonpriority creditor's name and mailing address Taylor Larrabee 2070 S. Carr St Wasilla AK 99654 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$302.49
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.439</div> Nonpriority creditor's name and mailing address Ted Sitek 8320 E. Citrus Way Scottsdale AZ 85250 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$328.99
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.440</div> Nonpriority creditor's name and mailing address Terrence Rohrer 6 Rolling Hills Dr. Minot ND 58703 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unsecured Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$335.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.441</div>	Nonpriority creditor's name and mailing address <u>Terry Amadon</u> <u>543 E. Boulder</u> <u>McLeod</u> <u>MT</u> <u>59052</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$190.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.442</div>	Nonpriority creditor's name and mailing address <u>Theis Protov</u> <u>48511 Hwy 437</u> <u>Enon</u> <u>LA</u> <u>70438</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$297.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.443</div>	Nonpriority creditor's name and mailing address <u>Theodore Condas</u> <u>891 East Arrowhead Lane</u> <u>Salt Lake City</u> <u>UT</u> <u>84107</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,189.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.444</div>	Nonpriority creditor's name and mailing address <u>Thomas Bell</u> <u>277 Robinson Dr.</u> <u>Tustin</u> <u>CA</u> <u>92782</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$403.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.445</div>	Nonpriority creditor's name and mailing address <u>Thomas Brotski</u> <u>N10567 County Road D</u> <u>Tomahawk</u> <u>WI</u> <u>54487</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$198.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.446</div>	Nonpriority creditor's name and mailing address <u>Thomas Carboy</u> <u>PO Box 313 1298 Rt. 209</u> <u>Cuddebackville</u> <u>NY</u> <u>12729</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$228.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.447</div>	Nonpriority creditor's name and mailing address <u>Thomas Greer</u> <u>514 Shadow Point</u> <u>San Marcos</u> <u>TX</u> <u>78666</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$274.40</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.448</div>	Nonpriority creditor's name and mailing address <u>Thomas Harding</u> <u>1013 S. Jeffers St</u> <u>North Platte</u> <u>NE</u> <u>69101</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$325.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.449</div>	Nonpriority creditor's name and mailing address <u>Thomas Hicks</u> <u>470 S. Cokesbury Td</u> <u>Henderson</u> <u>NC</u> <u>27537</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$330.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.450</div>	Nonpriority creditor's name and mailing address <u>Thomas Hill</u> <u>1122 W. Two Rivers Ln</u> <u>Eagle</u> <u>ID</u> <u>83616</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,179.96</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.451</div>	Nonpriority creditor's name and mailing address <u>Thomas Jackson</u> <u>7407 E. Superstition Dr.</u> <u>Kingman</u> <u>AZ</u> <u>86401</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$228.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.452</div>	Nonpriority creditor's name and mailing address <u>Thomas Launstein</u> <u>1874 Hawley Rd</u> <u>Leslie</u> <u>MI</u> <u>49251</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$235.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.453</div>	Nonpriority creditor's name and mailing address <u>Thomas Mcquade</u> <u>2307 Parkwood Ave</u> <u>Ann Arbor</u> <u>MI</u> <u>48104</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$278.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.454</div>	Nonpriority creditor's name and mailing address <u>Thomas Obrien</u> <u>10015 278th Ave</u> <u>Trevor</u> <u>WI</u> <u>53179</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$238.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.455</div>	Nonpriority creditor's name and mailing address <u>Thomas Pigott</u> <u>119 Greger Ave SE</u> <u>Huntsville</u> <u>AL</u> <u>35801</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$368.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.456</div>	Nonpriority creditor's name and mailing address <u>Thomas Prost</u> <u>Am Huttenbrenneranger 24</u> <u>8045 Graz</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$180.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.457</div> Nonpriority creditor's name and mailing address <u>Thomas Sipos</u> <u>203 6th St</u> <u>Weatherly</u> <u>PA</u> <u>18255</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.49</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.458</div> Nonpriority creditor's name and mailing address <u>Thomas Wood</u> <u>2211 NW 119th St</u> <u>Vancouver</u> <u>WA</u> <u>98685</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$367.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.459</div> Nonpriority creditor's name and mailing address <u>Tim Kautiainen</u> <u>29052 Cedar Glen Court</u> <u>Santa Clarita</u> <u>CA</u> <u>91390</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$184.79</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.460</div> Nonpriority creditor's name and mailing address <u>Tim Morgan</u> <u>11193 Jerusalem Church Rd</u> <u>Hammond</u> <u>LA</u> <u>70403</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$674.99</u>

Debtor **Roberson Cartridge Co., LLC**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.461</div>	Nonpriority creditor's name and mailing address <u>Timco Machine Tools, Inc</u> <u>1720 North Juniper Ave</u> <u>Broken Arrow</u> <u>OK</u> <u>74012</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Equipment repairs</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$16,338.14</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.462</div>	Nonpriority creditor's name and mailing address <u>Timothy Gorman</u> <u>1149 Sage St</u> <u>Evanston</u> <u>WY</u> <u>82930</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$379.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.463</div>	Nonpriority creditor's name and mailing address <u>Timothy Harrington</u> <u>11071 W. Lakeshore Dr.</u> <u>Brimley</u> <u>MI</u> <u>49715</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$804.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.464</div>	Nonpriority creditor's name and mailing address <u>Todd Brewster</u> <u>4125 Karg Industrial Pkwy</u> <u>Kent</u> <u>OH</u> <u>44470</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$551.49</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.465</div>	Nonpriority creditor's name and mailing address <u>Tom Neuburger</u> <u>91 Lombardy Lane</u> <u>Orinda</u> <u>CA</u> <u>94563</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$273.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.466</div>	Nonpriority creditor's name and mailing address <u>Ton Reiter</u> <u>109 NE Edgewater Dr.</u> <u>Lees Summit</u> <u>MO</u> <u>64064</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$389.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.467</div>	Nonpriority creditor's name and mailing address <u>Tosh Policastr</u> <u>608 Jade River Ct</u> <u>Roseville</u> <u>CA</u> <u>95678</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$385.39</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.468</div>	Nonpriority creditor's name and mailing address <u>Trevor Hall</u> <u>4980 Clifton Glendale Rd</u> <u>Spartanburg</u> <u>SC</u> <u>29307</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$439.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.469</div> Nonpriority creditor's name and mailing address <u>Troy Shadoan</u> <u>2132 W. Main St, Ste C</u> <u>Norman</u> <u>OK</u> <u>73069</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$583.98</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.470</div> Nonpriority creditor's name and mailing address <u>Ty Pivonka</u> <u>4830 Riva Ridge Rd</u> <u>Rapid City</u> <u>SD</u> <u>57702</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,275.98</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.471</div> Nonpriority creditor's name and mailing address <u>Tyler Gaus</u> <u>3701 Pearl St</u> <u>Batavia</u> <u>NY</u> <u>14020</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$273.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.472</div> Nonpriority creditor's name and mailing address <u>Tyrus George</u> <u>323 Penrose Dr.</u> <u>Irwin</u> <u>PA</u> <u>15642</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$187.49</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.473</div>	Nonpriority creditor's name and mailing address <u>Vyacheslav Kan</u> <u>3909 Witmer Rd</u> <u>Niagara Falls, NY 1435</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$238.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.474</div>	Nonpriority creditor's name and mailing address <u>Wade Burns</u> <u>1632 Capitol Way</u> <u>Bismarck</u> <u>ND</u> <u>58501</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$506.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.475</div>	Nonpriority creditor's name and mailing address <u>Wallace Mclery</u> <u>108 W. Broadway St</u> <u>Fort Meade</u> <u>FL</u> <u>33841</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$438.79</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.476</div>	Nonpriority creditor's name and mailing address <u>Wayne Wilson</u> <u>2727 Bitterroot PI</u> <u>Highlands Ranch</u> <u>CO</u> <u>80129</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$408.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.481</div>	Nonpriority creditor's name and mailing address <u>William Allen</u> <u>12 Henry Ave</u> <u>Collegeville</u> <u>PA</u> <u>19426</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$258.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.482</div>	Nonpriority creditor's name and mailing address <u>William Anderson</u> <u>11057 Flower Ave</u> <u>Fountain Valley</u> <u>CA</u> <u>92708</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$412.49</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.483</div>	Nonpriority creditor's name and mailing address <u>William Auger</u> <u>15 Sinclair Ct</u> <u>Barrie, ON L4N 5X8</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$420.00</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.484</div>	Nonpriority creditor's name and mailing address <u>William Bowman</u> <u>3263 W. 106th St</u> <u>Carmel</u> <u>IN</u> <u>46032</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$289.99</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.485</div>	Nonpriority creditor's name and mailing address <u>William Browne</u> <u>19480 Cross Key Rd</u> <u>Boykins</u> <u>VA</u> <u>23827</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$299.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.486</div>	Nonpriority creditor's name and mailing address <u>William Christianson</u> <u>58 Valleybrook Dr.</u> <u>Hendersonville</u> <u>TN</u> <u>37075</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$313.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.487</div>	Nonpriority creditor's name and mailing address <u>William Core</u> <u>2113 A Parker Town Rd</u> <u>Lot 1 A</u> <u>Four Oaks</u> <u>NC</u> <u>27524</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$195.99</u>
<div style="border: 1px solid black; padding: 2px; width: fit-content;">3.488</div>	Nonpriority creditor's name and mailing address <u>William Dover</u> <u>256 Timbrook Farm</u> <u>Clarkesville</u> <u>GA</u> <u>90523</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$298.99</u>

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Amount of claim

3.493 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:
Check all that apply.

\$256.99

William Whitlock

- ☐ Contingent
☐ Unliquidated
☐ Disputed

890 Valley Rd

Moorpark, CA93021

Basis for the claim:

Unsecured

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

3.494 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:
Check all that apply.

\$3,260.00

Xcel Energy

- ☐ Contingent
☐ Unliquidated
☐ Disputed

PO Box 9477

Basis for the claim:

Utilities

Minneapolis

MN 55484

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

3.495 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:
Check all that apply.

\$290.49

Zixiao Zhu

- ☐ Contingent
☐ Unliquidated
☐ Disputed

847 NE 190th St

Basis for the claim:

Unsecured

Shoreline

WA 98155

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

Debtor Roberson Cartridge Co., LLC Case number (if known) 22-20192-7

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1 5a. \$18,991.00

5b. Total claims from Part 2 5b. + \$406,420.84

5c. Total of Parts 1 and 2 5c. \$425,411.84
Lines 5a + 5b = 5c.